PINE MANOR HEALTH CARE CENTER 1625 E MAIN ST

CLINTONVILLE 54929 Phone: (715) 823-3135	i	Ownership:	Corporation
Operated from 1/1 To 12/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/04):	76	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/04):	78	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	67	Average Daily Census:	67

Services Provided to Non-Residents	Age, Gender, and Primary Di	agnosis	of Residents (1	2/31/04)	Length of Stay (12/31/04)	%		
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	34.3	
Supp. Home Care-Personal Care	No					1 - 4 Years	44.8	
Supp. Home Care-Household Services	No	Developmental Disabilities	1.5	Under 65	7.5	More Than 4 Years	20.9	
Day Services	Yes	Mental Illness (Org./Psy)	59.7	65 - 74	13.4			
Respite Care	Yes	Mental Illness (Other)	7.5	75 - 84	31.3		100.0	
Adult Day Care	Yes	Alcohol & Other Drug Abuse	1.5	85 - 94	43.3	********	*****	
Adult Day Health Care	Yes	Para-, Quadra-, Hemiplegic	0.0	95 & Over	4.5	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Res	er 100 Residents	
Home Delivered Meals	No	Fractures	6.0		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	7.5	65 & Over	92.5			
Transportation	No	Cerebrovascular	6.0			RNs	7.8	
Referral Service	No	Diabetes	1.5	Gender	왕	LPNs	8.5	
Other Services	No	Respiratory	3.0			Nursing Assistants,		
Provide Day Programming for	- 1	Other Medical Conditions	6.0	Male	35.8	Aides, & Orderlies	42.5	
Mentally Ill	No			Female	64.2			
Provide Day Programming for	ĺ		100.0					
Developmentally Disabled	Yes				100.0	l		

Method of Reimbursement

		Medicare Title 18			edicaid itle 19			Other			Private Pay	2		amily Care			anaged Care			
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	
Int. Skilled Care	0	0.0	0	1	2.0	133	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.5
Skilled Care	4	100.0	313	46	92.0	114	0	0.0	0	13	100.0	143	0	0.0	0	0	0.0	0	63	94.0
Intermediate				3	6.0	95	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	4.5
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		50	100.0		0	0.0		13	100.0		0	0.0		0	0.0		67	100.0

PINE MANOR HEALTH CARE CENTER

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12	31/04
Deaths During Reporting Period							·
					% Needing		Total
Percent Admissions from:		Activities of	8	As	sistance of	% Totally	Number of
Private Home/No Home Health	11.5	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		43.3	56.7	67
Other Nursing Homes	9.6	Dressing	4.5		43.3	52.2	67
Acute Care Hospitals	0.0	Transferring	13.4		55.2	31.3	67
Psych. HospMR/DD Facilities	71.2	Toilet Use	9.0		43.3	47.8	67
Rehabilitation Hospitals	0.0	Eating	34.3		52.2	13.4	67
Other Locations	7.7	******	* * * * * * * * * * * * * * *	*****	******	*******	*****
Total Number of Admissions	52	Continence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	3.0	Receiving Resp	iratory Care	9.0
Private Home/No Home Health	29.1	Occ/Freq. Incontine	nt of Bladder	64.2	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	9.1	Occ/Freq. Incontine	nt of Bowel	28.4	Receiving Suct	ioning	0.0
Other Nursing Homes	3.6				Receiving Osto	my Care	6.0
Acute Care Hospitals	9.1	Mobility			Receiving Tube	Feeding	0.0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	4.5	Receiving Mech	anically Altered Diets	31.3
Rehabilitation Hospitals	0.0						
Other Locations	3.6	Skin Care			Other Resident C	haracteristics	
Deaths	45.5	With Pressure Sores		1.5	Have Advance D	irectives	100.0
Total Number of Discharges		With Rashes		7.5	Medications		
(Including Deaths)	55				Receiving Psyc	hoactive Drugs	83.6

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lice	ensure:		
	This	This Proprieta			-99	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	8	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	84.8	84.2	1.01	88.5	0.96	87.7	0.97	88.8	0.95
Current Residents from In-County	61.2	76.9	0.80	72.5	0.84	70.1	0.87	77.4	0.79
Admissions from In-County, Still Residing	21.2	19.0	1.11	19.6	1.08	21.3	0.99	19.4	1.09
Admissions/Average Daily Census	77.6	161.6	0.48	144.1	0.54	116.7	0.67	146.5	0.53
Discharges/Average Daily Census	82.1	161.5	0.51	142.5	0.58	117.9	0.70	148.0	0.55
Discharges To Private Residence/Average Daily Census	31.3	70.9	0.44	59.0	0.53	49.0	0.64	66.9	0.47
Residents Receiving Skilled Care	95.5	95.5	1.00	95.0	1.01	93.5	1.02	89.9	1.06
Residents Aged 65 and Older	92.5	93.5	0.99	94.5	0.98	92.7	1.00	87.9	1.05
Title 19 (Medicaid) Funded Residents	74.6	65.3	1.14	66.3	1.13	68.9	1.08	66.1	1.13
Private Pay Funded Residents	19.4	18.2	1.07	20.8	0.93	19.5	0.99	20.6	0.94
Developmentally Disabled Residents	1.5	0.5	2.98	0.4	4.02	0.5	3.03	6.0	0.25
Mentally Ill Residents	67.2	28.5	2.36	32.3	2.08	36.0	1.87	33.6	2.00
General Medical Service Residents	6.0	28.9	0.21	25.9	0.23	25.3	0.24	21.1	0.28
Impaired ADL (Mean)	64.8	48.8	1.33	49.7	1.30	48.1	1.35	49.4	1.31
Psychological Problems	83.6	59.8	1.40	60.4	1.38	61.7	1.35	57.7	1.45
Nursing Care Required (Mean)	6.9	6.5	1.07	6.5	1.07	7.2	0.96	7.4	0.93